

Approved for use through 10/31/2002. OMB 0651-0032  
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
 DESIGN  
 PATENT APPLICATION  
 (37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 00568-286923

First Named Inventor Pankaj Patel et al.

**COMPLETE IF KNOWN**

Application Number 10/665,066

Filing Date September 17, 2003

Group Art Unit 1731

Examiner Name Unknown

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MATERIALS AND METHODS FOR MANUFACTURING CIGARETTES**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **09/17/2003** as United States Application Number or PCT International

Application Number **10/665,066** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 5]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label				OR <input checked="" type="checkbox"/> Correspondence address below	
Name <b>J. Michael Boggs</b>					
Address <b>1001 West Fourth Street</b>					
City <b>Winston-Salem</b>		State <b>NC</b>		ZIP <b>27101-2400</b>	
Country <b>USA</b>		Telephone <b>(336) 747-7536</b>		Fax <b>(336) 734-2632</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) <b>Pankaj</b>		Family Name or Surname <b>Patel</b>			
Inventor's Signature <i>Pankaj Patel</i>		Date <b>Feb 11, 2004</b>			
Clemmons Residence: City		NC State		USA Country	
3761 Squirewood Drive					
Mailing Address					
Clemmons City		NC State		27012 Zip	
USA Country		USA Citizenship			
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) <b>Charles Ray</b>		Family Name or Surname <b>Ashcraft</b>			
Inventor's Signature <i>Charles Ray Ashcraft</i>		Date <b>Feb. 11, 2004</b>			
Winston-Salem Residence: City		NC State		USA Country	
5168 Huntcliff Trail					
Mailing Address					
Winston-Salem City		NC State		27104 Zip	
USA Country		USA Citizenship			
<input checked="" type="checkbox"/> Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 3 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<b>John Joseph</b>		<b>Tomel, Jr.</b>	
Inventor's Signature <i>John Joseph Tomel, Jr.</i>		Date <i>2/11/04</i>	
Residence: City <b>Mocksville</b>	State <b>NC</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address			
Mailing Address <b>1296 Bear Creek Church Road</b>			
City <b>Mocksville</b>	State <b>NC</b>	ZIP <b>27028</b>	Country <b>USA</b>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<b>Gregory Alan</b>		<b>Holmes</b>	
Inventor's Signature <i>Gregory Alan Holmes</i>		Date <i>2/18/2004</i>	
Residence: City <b>Winston-Salem</b>	State <b>NC</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address			
Mailing Address <b>173 Teakwood Drive</b>			
City <b>Winston-Salem</b>	State <b>NC</b>	Zip <b>27127</b>	Country <b>USA</b>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<b>Vernon Brent</b>		<b>Barnes</b>	
Inventor's Signature <i>Vernon Brent Barnes</i>		Date <i>2/11/04</i>	
Residence: City <b>Advance</b>	State <b>NC</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address			
Mailing Address <b>154 Country Circle</b>			
City <b>Advance</b>	State <b>NC</b>	Zip <b>27006</b>	Country <b>USA</b>

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

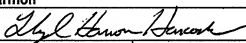
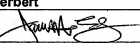
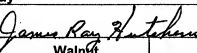
Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2002. OMB 0551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
**Page 4 of 5**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lloyd Harmon		Hancock	
Inventor's Signature 	Date 02/18/04		
Residence: City Walnut Cove	State NC	Country USA	Citizenship USA
Mailing Address			
3183 Rosebud Road			
City Walnut Cove	State NC	ZIP 27052	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James Herbert		Ellis, Jr.	
Inventor's Signature 	Date 3/18/04		
Residence: City Lexington	State SC	Country USA	Citizenship USA
Mailing Address			
142 Ashley Hills Drive			
City Lexington	State SC	Zip 29072	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James Ray		Hutchens	
Inventor's Signature 	Date 2-11-04		
Residence: City Walnut Cove	State NC	Country USA	Citizenship USA
Mailing Address			
1312 Young Road			
City Walnut Cove	State NC	Zip 27052	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 5 of 5**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gregory Scott		Pierce	
Inventor's Signature <i>Gregory Scott</i>		Date <i>2/20/04</i>	
Residence: City Kernersville	State NC	Country USA	Citizenship USA
Mailing Address			
Mailing Address 128 Thomas Drake Court			
City Kernersville	State NC	ZIP 27284	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Don Hayes		White	
Inventor's Signature <i>Don Hayes Titrate</i>		Date <i>2-13-04</i>	
Residence: City King	State NC	Country USA	Citizenship USA
Mailing Address			
Mailing Address 1702 Marshall Smith Road			
City King	State NC	Zip 27021	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.